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## BIB DATA SHEET

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SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
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## APPLICANTS

Kirk D. Swenson, North Caldwell, NJ;  
 James C. Schneider, Wayne, NJ;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

\*\* IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/15/2004

Foreign Priority claimed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		NJ	12	13  8	2

## ADDRESS

David W. Hight, VP & Chief IP Counsel  
 Becton, Dickinson and Company  
 (The Webb Firm)  
 1 Becton Drive, MC 110  
 Franklin Lakes, NJ 07414-1880  
 UNITED STATES

## TITLE

Safety blood collection holder

FILING FEE RECEIVED 1438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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